

**Central States ACSM COVER SHEET  
FOR SCHOLARSHIP APPLICATIONS**

Applicant's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

\_\_\_\_\_

Is the applicant an Central States ACSM member?       Yes       No

College/University: \_\_\_\_\_

Academic Year: \_\_\_\_\_ Cumulative GPA: \_\_\_\_\_

Area of Study: \_\_\_\_\_ Advisor: \_\_\_\_\_

\_\_\_\_\_

List national and regional ACSM meetings attended in the previous three years.

Year: \_\_\_\_\_ Location of Meeting: \_\_\_\_\_

Year: \_\_\_\_\_ Location of Meeting: \_\_\_\_\_

Year: \_\_\_\_\_ Location of Meeting: \_\_\_\_\_

Year: \_\_\_\_\_ Location of Meeting: \_\_\_\_\_

Year: \_\_\_\_\_ Location of Meeting: \_\_\_\_\_

Year: \_\_\_\_\_ Location of Meeting: \_\_\_\_\_

Has the applicant presented at a national or regional ACSM meeting?

No       Yes (if Yes, list on curriculum vitae)

Has the applicant authored or co-authored a peer-reviewed abstract or manuscript?

No       Yes (if Yes, list on curriculum vitae)

List all leadership activities (i.e., community engagement, professional society participation, university committees). Attach additional pages, if necessary.